

UTAH DEPARTMENT OF AGRICULTURE AND FOOD

Division of Regulatory Services

PO Box 146500 - 350 North Redwood Road Salt Lake City, UT 84114-6500 (801) 538-7151 Fax: (801) 538-4949

APPLICATION FOR THE REGISTRATION OF BEDDING, UPHOLSTERED FURNITURE & QUILTED CLOTHING

Name of Manufacturer (Please Print)					
Name of Wholesale Dealer / Importer - Exporter / Distributor					
Business Address	City	State		Zip	
Mailing Address	City	State		Zip	
Phone Number	Uniform Registry Number				
If you have not been assigned a uniform registry number and v	vould like th	is state to issue one to ye	ou, please	state: Yes [] No []	
Federal RN or WPL (Quilted Clothing Only)					
MANUFACTURE		СНЕ	ск вох	FEES*	
A. Furniture (all types)				\$55.00	
B. Sleeping Bags (cuddle bags, etc.)				\$55.00	
C. Pillows (decor, bolsters, etc.)				\$55.00	
D. Mattresses (pads, mats, cushions, etc.)				\$55.00	
E. Comforters, Quilts, etc.				\$55.00	
F. Exercise Equipment (pads, mats, benches, seats, etc.)				\$55.00	
G. Baby Furniture (carriages, strollers, car seats, carriers, baths, etc.	.)			\$55.00	
H. Quilted Clothing (gloves, boots, hats, coats, etc.)				\$55.00	
I. Other (bulk materials, bales, slabs, etc.)				\$55.00	
WHOLESALE DEALER / IMPORTER - EXPORTER / DISTRIBUTOR				\$55.00	
SUPPLY DEALER				\$55.00	
UPHOLSTERER, REPAIRER (one or more employees)				\$40.00	
UPHOLSTERER, REPAIRER (no employees)				\$25.00	
* PLEASE NOTE: A person who holds a valid manufacturer-s license n without the payment of an additional license fee.	nay, upon app	olication, be licensed as a w	holesale dea	aler, supplier, or repairer	
Have you previously been licensed for this registry number in the State	of Utah?	Yes [] No [] Ye	ar	
Contact Name (please print)					
Signature			Da	te	
All licenses must be renewed before January 1 st of each year. After assigned number is for registration and identification purposes only. The					

procedure, tag or record (not transferrable).

MAKE CHECK PAYABLE TO:

UTAH DEPARTMENT OF AGRICULTURE AND FOOD (Do not send cash)

CITATIVE TARTINE TO THE TOTAL TARE TO COME COUNTY				
FOR OFFICE USE ONLY				
Code:	License:	Uniform Registry #:		
Federal RN or WPL #:	Date:	Year:		